TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM436121

SUBMISSION TYPE:	RESUBMISSION
NATURE OF CONVEYANCE:	CHANGE OF NAME
RESUBMIT DOCUMENT ID:	900411564

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
RECOVERCARE DELAWARE, LLC		01/31/2015	Corporation: DELAWARE

RECEIVING PARTY DATA

Name:	RECOVERCARE, LLC	
Street Address:	2430 WHITEHALL PARK DRIVE	
Internal Address:	SUITE 100	
City:	CHARLOTTE	
State/Country:	NORTH CAROLINA	
Postal Code:	28273	
Entity Type:	Limited Liability Company: DELAWARE	

PROPERTY NUMBERS Total: 14

Property Type	Number	Word Mark
Serial Number:	74328320	RECOVERCARE
Serial Number:	75266248	STIMULUS SYSTEM
Serial Number:	76519880	STIMULUS PLUS
Serial Number:	76527481	STIMULUS SYSTEM JR
Serial Number:	77086719	RECOVERTURN
Serial Number:	77086724	RECOVERAIR
Serial Number:	77242290	PATIENT CARE SYSTEMS, INC.
Serial Number:	77429792	WOUNDTRAKKER
Serial Number:	78716065	SAFE-TDRIVE
Serial Number:	85641219	STIMULUS
Serial Number:	85641419	RECOVERAIR STIMULUS
Serial Number:	85726164	RECOVERCARE
Serial Number:	85726170	RECOVERCARE
Serial Number:	85739530	CAREGLYDE

CORRESPONDENCE DATA

Fax Number:

TRADEMARK

900414340 REEL: 006108 FRAME: 0657

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.

Phone: 214 932 6410

Email: mguidry@mcguirewoods.com

Correspondent Name: AARON J. PICKELL **Address Line 1:** 1750 TYSONS BLVD

Address Line 2: SUITE 1800

Address Line 4: TYSONS, VIRGINIA 22102

ATTORNEY DOCKET NUMBER: 2070460 MARKS

NAME OF SUBMITTER: Melissa Guidry

SIGNATURE: /Melissa Guidry/

DATE SIGNED: 07/21/2017

Total Attachments: 1

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REEL: 006108 FRAME: 0658

State of Delaware Secretary of State Division of Corporations Delivered 05:46 PM 02/06/2015 FILED 05:34 PM 02/06/2015 SRV 150162783 - 5664268 FILE

STATE OF DELAWARE CERTIFICATE OF AMENDMENT OF CERTIFICATE OF FORMATION OF RECOVERCARE DELAWARE, LLC

Pursuant to Section 18-202 of the Delaware Limited Liability Company Act

RecoverCare Delaware, LLC, a limited liability company formed and existing under the Delaware Limited Liability Company Act (the "Company"), does hereby certify as follows:

FIRST:

The name of the Company is RecoverCare Delaware, LLC.

SECOND:

Section 1 of the Certificate of Formation shall be amended as follows:

Name. The name of the limited liability company formed hereby is 1. "RecoverCare, LLC".

THIRD:

The foregoing amendment was duly adopted in accordance with the provisions of Section 18-202 of the Delaware Limited Liability Company Act.

IN WITNESS WHEREOF, the Company has caused this Certificate to be executed by its duly authorized signatory on this 31st day of January, 2015.

By:

Name:

Lisa Gilpin

Title: Authorized Signatory

AMERICAS 90303132

RECORDED: 06/29/2017

TRADEMARK REEL: 006108 FRAME: 0659